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January 15, 2009

TO: Each Supervisor

FROM: John F. Schunhoff, Ph.D. 
Interim Director

SUBJECT: **STATUS REPORT ON AUDITOR-CONTROLLER'S
REPORT ON THE INVESTIGATION OF THE
PERSONNEL REVIEW OF MARTIN LUTHER
KING, JR.-HARBOR HOSPITAL EMPLOYEES**

This is to provide a current status of DHS' implementation of recommendations from the September 2008 audit report. As noted on the attached detailed status report, 8 (50%) of the 16 recommendations have been implemented, with the remainder partially implemented.

DHS has implemented all recommendations related to the Department of Justice (DOJ) background screening cases, and has taken disciplinary actions as appropriate.

Also, a team of CEO and DHS managers has completed a review of the DHS Human Resources (HR) operations and organizational structure, and has submitted an organization and staffing plan for budgetary consideration. The CEO is preparing a separate correspondence to update your Board on this initiative.

DHS completed competency re-testing for the MLK MACC nurses during November 2008. The development of system-wide nurse competency training and testing standards remains on target for March 2009. The DHS Office of Nursing Affairs has also convened working groups to implement system-wide testing standards for allied health professionals (e.g., physical therapists, respiratory therapists, etc.) by June 2009.

We will provide your Board with another status report within 90 days. Please let me know if you have any questions or need additional information.

JFS:jj

Attachment

c: Acting Auditor-Controller
Chief Executive Officer
Director of Personnel
Executive Officer, Board of Supervisors

COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH SERVICES

**IMPLEMENTATION STATUS REPORT TO THE AUDITOR-CONTROLLER'S
RECOMMENDATIONS REGARDING ITS INVESTIGATION OF THE PERSONNEL REVIEW OF
MARTIN LUTHER KING, JR.-HARBOR HOSPITAL EMPLOYEES**

RECOMMENDATION 1: Re-live scan six employees whose DOJ results remain outstanding and the three employees whose DOJ results could not be processed because of unclear prints. Ensure that the 81 employees from the No Show Log who were reassigned to DHS Administration and/or are on leave have been Live Scanned or will be Live Scanned upon their return from leave.

September 2008 DHS Response:

We concur.

In late July and early August, 2008, DHS HR live scanned the remainder of the 2007 King-mitigated employees that did not have results on file, with the exception of employees on long term leave of absence. DHS will live scan the long term leave employees upon their return to work.

Target date: Completed.

January 2009 Status:

Implemented.

RECOMMENDATION 2: Codify procedures for documenting job nexus determinations including a detailed justification for each decision

September 2008 DHS Response:

DHS uses a standard format to document these decisions. DHS will consult with DHR regarding the appropriate level of documentation required to support these decisions, and revise as needed.

Target date: October 31, 2008

January 2009 Status:

Implemented. After consulting with DHR and CEO, DHS revised and implemented procedures for reviewing and documenting job nexus determinations in October 2008.

RECOMMENDATION 3: Consider consolidating the collection of DOJ information by centralizing the receipt of all DOJ results within DHS-HR, and designate staff who are expressly responsible for receiving and analyzing this information.

September 2008 DHS Response:

We concur.

DHS consolidated the review and processing of DOJ results at its central HR location:

1. DHS has obtained approval from the Department of Justice to access DOJ results at the central DHS HR Performance Management section.
2. In cooperation with a team from the CEO, DHS has developed a new organizational structure and staffing for its HR Performance Management section. This includes a dedicated DOJ Unit, which will review and process all DOJ results. The CEO approved the new staffing plan in September 2008.
3. DHS has assigned employees in its HR Performance Management section to review DOJ results on a daily basis to ensure timely disposition.

Target Date: In process through October 31, 2008.

January 2009 Status:

Implemented. The DOJ unit supervisor began on October 23, 2008, the unit has been established, and DOJ criminal history records are reviewed centrally. DHS HR fully centralized receipt of DOJ results effective December 16, 2008.

RECOMMENDATION 4: Work with DHR to review the Job Nexus decisions for the 99 employees in the No Job Nexus category and expedite the review of the 30 DOJ Hits that are classified as In Process.

September 2008 DHS Response:

We concur.

DHS HR continues to actively work to resolve the 30 DOJ Hits referenced above, and has already resolved several of these cases. DHS will continue to consult with DHR and County Counsel as appropriate.

On September 10, 2008, DHR assigned a team to begin reviewing all the cases referenced above.

Target Date: In process through October 31, 2008.

January 2009 Status:

Implemented. DHR conducted an independent review and provided a status report to the Board under separate cover. DHS issued the discipline recommended by DHR, which is in various phases of the disciplinary process (e.g., completed, Skelly hearing, grievance, etc.).

RECOMMENDATION 5: Consult with DHR about the possibility of taking disciplinary action against those employees who failed to accurately disclose criminal convictions.

September 2008 DHS Response:

We concur.

DHS will work closely with DHR to evaluate the cases where employees failed to disclose their convictions, and will consult with DHR and County Counsel regarding potential disciplinary action.

Target Date: In process through October 31, 2008.

January 2009 Status:

Implemented. DHR submitted its final report to the Board on October 20, 2008. DHS worked with DHR to implement the required disciplinary actions.

RECOMMENDATION 6: Evaluate the propriety of actions by the PM staff who processed the DOJ hits and the two managers involved in the second chance process, and determine if corrective and/or disciplinary action is warranted.

September 2008 DHS Response:

We concur.

DHS is working with DHR to assess possible disciplinary action against HR employees involved in delays or those who allowed second chances for employees to disclose convictions.

Target Date: In process through October 31, 2008.

January 2009 Status:

Implemented. DHR assessed potential disciplinary action against DHS HR employees who involved in the delays or those who allowed second chances for employees to disclose convictions. DHS implemented DHR's recommendations.

RECOMMENDATION 7: Conduct a detailed analysis of staff training and continuing education programs for patient care staff across DHS facilities.

September 2008 DHS Response:

We concur.

The DHS Office of Nursing Affairs will engage an outside nursing consultant to conduct an independent assessment of the various components included in staff competency, training, and continuing education. The following components will be assessed:

1. Individual facility competency and training policies and procedures
2. Current policies, procedures, and practices related to the administration, monitoring, and tracking of nursing staff competency, training, and continuing education.
3. Review of facility curricula related to staff competency and training

4. Remediation and retesting standards, including policy on the number of times an employee can fail competency exams and subsequent re-assignment as a result of the failure

Upon completion of the assessment phase, the Office of Nursing Affairs will work with the nursing consultant and facility Chief Nursing Officers in implementing a centralized process for conducting and validating staff competency, which will include the following components:

1. A centralized process for the administration, monitoring, and tracking of nursing staff competency, training, and continuing education
2. A standardized core curriculum based on industry standards and regulatory standards
3. A standardized policy on the number of times nursing personnel can fail competency exams and the number of times nursing personnel can be remediated and retested.
4. A centralized process for monitoring, tracking, and reporting of nursing staff competency
5. A centralized oversight by Office of Nursing Affairs of all components of nursing staff competency, training, and continuing education

Target Date: Completion by March 31, 2009.

January 2009 Status:

Partially Implemented. The DHS Office of Nursing Affairs has established a committee consisting of facility Chief Nursing Officers, the Assistant Director of DHS Human Resources, and Nurse Educators. The kick-off meeting was held on September 30, 2008. A project overview of the competency testing program was presented by the Director of Nursing Affairs as outlined below.

- Methodology for competency assessment and annual skills validation
- Components of Competency Program:
 - New Hire Orientation including pre-hire medication testing
 - Orientation to new equipment
 - Orientation to new policies and procedures
 - Standardized Curriculum
 - Codified guidelines and policy for retesting and remediation
 - Categories of personnel required to complete competency testing
 - Centralized Tracking and Monitoring
 - Performance Improvement Education

The committee meets weekly as a working group. An oversight committee and three sub-committees were established to develop a template for a system wide competency program. The three sub-committees are as follows:

- Assessment Sub-committee: charged with conducting a detailed analysis of DHS facility competency and best practices; review of facility policies and procedures, and recommendations on a standardized competency format
- Curriculum Sub-committee: this committee's main responsibility is to develop a standard curriculum for competency testing and skills validation
- Data Sub-committee: this committee's main responsibility is to develop tracking and monitoring tools, including performance indicators

The assessment phase has been completed. This phase involved an assessment of each facility's current competency testing standards, components, and methodology. The next phase is to determine the components of a generic competency testing and training program for all DHS facilities and review all current policies and procedures related to competency testing and skills validation. The deadline for project completion is March, 2009.

RECOMMENDATION 8: Develop and codify core curricula for nurse and patient care staff competency examinations based on DHS and industry best practices, and predicated where possible on standards promulgated by licensing or credentialing authorities.

September 2008 DHS Response:

We concur.

The DHS Office of Nursing Affairs will work with the nursing consultant and facility Chief Nursing Officers in developing a standardized core curriculum for all nursing personnel (County and non-County) based on industry standards and regulatory standards. (See the DHS action steps for Recommendation 7).

Target Date: Completion by March 31, 2009.

January 2009 Status:

Partially Implemented. See recommendation 7.

RECOMMENDATION 9: Establish policies ensuring that minimum testing standards are applied to patient care workers at all facilities.

September 2008 DHS Response:

We concur.

The Office of Nursing Affairs will work with the nursing consultant and facility Chief Nursing Officers to develop standardized minimum testing standards for all patient care staff at all facilities. The standards will be incorporated into a system-wide Competency and Training Policy and Procedure. (See the DHS action steps for Recommendation 7).

Target Date: Completion by March 31, 2009.

January 2009 Status:

Partially Implemented. See recommendation 7.

RECOMMENDATION 10: Codify guidelines limiting the number of times a patient care worker may fail testing in a particular competency before being re-assigned, retained, and or referred for discipline.

September 2008 DHS Response:

We concur.

The DHS Office of Nursing Affairs will work with the nursing consultant and facility Chief Nursing Officers in developing a standardized policy on the number of times nursing personnel can fail competency exams and the number of times nursing personnel can be remediated and retested and subsequently re-assigned after failing competency testing. This policy will be incorporated into a system-wide Competency and Training Policy and Procedure. (See the DHS action steps for Recommendation 7).

Target Date: Completion by March 31, 2009.

January 2009 Status:

Partially Implemented. See recommendation 7.

RECOMMENDATION 11: Examine the feasibility of implementing independent oversight for competency examinations, possibly through a third party proctor or via direct supervision by nurse educators from a different medical facility than the examinees.

September 2008 DHS Response:

We concur.

The DHS Office of Nursing Affairs will provide oversight for competency training and continuing education. This Office will work with facility Chief Nursing Officers on the implementation of system-wide competency training and continuing education programs.

Target Date: Completion by June 30, 2009.

January 2009 Status:

Partially Implemented. See recommendation 7.

RECOMMENDATION 12: Centralize the aggregation and reporting of competency test results.

September 2008 DHS Response:

We concur.

The DHS Office of Nursing Affairs will provide oversight for competency training and continuing education programs. Competency testing data will be aggregated and trended by facility and reported to the Board on a semi-annual basis. The Office of Nursing Affairs will also work with HR Regulatory Compliance Division to develop an integrated database that will be used by both HR and the Office of Nursing Affairs.

Target Date: Completion by June 30, 2009.

January 2009 Status:

Partially Implemented. See recommendation 7.

RECOMMENDATION 13: Administer competency examinations to all MACC employees with patient care duties using the newly codified uniform standards for testing and remediation.

September 2008 DHS Response:

We concur.

By October 31, 2008, the DHS Office of Nursing Affairs will re-administer competency testing to all MLK MACC nursing staff.

By June 30, 2009 (after new system-wide nursing testing standards are developed), the DHS Office of Nursing Affairs will be responsible for ensuring that the MACC employees undergo same standardized competency testing as that applied to all DHS facilities.

By June 30, 2009, DHS will convene a task force for each major group of allied health professionals (e.g., occupational therapists, physical therapists, etc.). Each task force will develop and implement system-wide standardized competency testing based on industry best practices.

Target Date: Initial testing by October 31, 2008; completion by June 30, 2009.

January 2009 Status:

Partially implemented. DHS completed new nurse competency testing at the MLK MACC during November 2008 (see attached Board memo dated December 10, 2008).

As noted under recommendation 7, the development of system-wide nurse competency testing standards is in progress. DHS is also developing system-wide competency testing standards for allied health professionals (e.g., respiratory care, laboratory, radiology, physical therapy, etc.) with a target completion date of June 2009.

RECOMMENDATION 14: Expedite the implementation of staffing and organizational changes and other reforms arising from DHS/CEO HR review.

September 2008 DHS Response:

We concur.

1. In cooperation with the CEO, DHS HR has begun to implement a new organizational structure for the Performance Management section that will provide for increased supervision and staffing.
2. On June 23, 2008, DHS HR hired a new manager over Performance Management.
3. DHS HR is in the process of hiring additional staff consistent with the new organizational structure. In August 2008, DHS made two offers of employment and hiring efforts continue.

DHS continues to work with the CEO to assess staffing needs, organizational improvements, and needed controls throughout the DHS HR organization, not only in Performance Management.

Target Date: Completion of new organization charts and staffing plan by November 30, 2008.

January 2009 Status:

Partially implemented. DHS HR continues to fill vacancies in the new organizational structure for Performance Management. To date, 13 offers of employment have been made, of which 5 were hired and 8 are pending hire.

Organization charts and staffing plans for the proposed structure have been completed and submitted for budget consideration. The CEO is preparing a status report to the Board under separate cover.

RECOMMENDATION 15: Examine the duties and responsibilities of HR managers at the MACC.

September 2008 DHS Response:

We concur.

As part of this year's MAPP goals, the DHS HR Administrator and the facility Personnel Officers will reassess the role of the hospital Personnel Officers and determine staffing needs.

Target Date: Completion of new organization charts and staffing plan by November 30, 2008.

January 2009 Status:

Implemented. DHS HR completed the assessment of the role of the hospital Personnel Officers and submitted recommendations, organization charts, and staffing plans to executive management to clearly define their responsibilities.

RECOMMENDATION 16: Consider reorganizing personnel, discipline and performance management operations at the MACC as part of the DHS/CEO HR Review.

September 2008 DHS Response:

We concur.

As noted above, the DHS and the CEO are currently evaluating how DHS Human Resources is organized and staffed. DHS is moving to implement the organizational restructure proposed for Performance Management, and will review other functions over the next two months.

Target Date: Completion of new organization charts and staffing plan by November 30, 2008.

January 2009 Status:

Implemented. DHS and the CEO completed the evaluation of how DHS Human Resources is organized and staffed. CEO is preparing a report to the Board under separate cover.